

UNITED STATES BANKRUPTCY COURT
DISTRICT OF NEW JERSEY

Caption in Compliance with D.N.J. LBR 9004-1(b)

KARINA PIA LUCID, ESQ. LLC
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Karina Pia Lucid, Esq. Counsel for the Debtor,
William E. Freeman,

In Re:

William E. Freeman, Debtor(s)

Case No.: 22-19677

Chapter: 13

Adv. No.: n/a

Hearing Date: 8/23/23 at 10:00 AM

Judge: MBK

CERTIFICATION OF SERVICE

1. I, Annaliesa PROCANIK :

☐ represent _____ in this matter.

☒ am the secretary/paralegal for Karina Pia Lucid, who represents
William E. Freeman, in this matter.

☐ am the _____ in this case and am representing myself.

2. On JULY 24, 2023, I sent a copy of the following pleadings and/or documents
to the parties listed in the chart below.

-Notice of Chapter 13 Plan Transmittal

-Certificate of Service

-MODIFIED PLAN

3. I certify under penalty of perjury that the above documents were sent using the mode of service
indicated.

Date: 7/24/2023

/s/ Annaliesa Procanik
Signature

Name and Address of Party Served	Relationship of Party to the Case	Mode of Service
ALBERT RUSSO, TRUSTEE CN 4853 TRENTON, NJ 08650	TRUSTEE	<input type="checkbox"/> Hand-delivered <input type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input checked="" type="checkbox"/> Other <u>ECF</u> (As authorized by the Court or by rule. Cite the rule if applicable.)
STATE OF NEW JERSEY TRESURER 125 WEST STATE STREET Trenton, NJ 08608	CREDITOR	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
Schiller, Knapp, Lefkowitz & Hertzell LLP 950 New London Road Suite 109 Latham, NY 12110-2100	ATTORNEY SECURED CREDITOR	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input checked="" type="checkbox"/> Other <u>ECF</u> (As authorized by the Court or by rule. Cite the rule if applicable.)
Pitney Hardin Kipp & Szuch LLP attn: Janice Forman LA; Park Avenue at M PO Box 1945 Morristown, NJ 07962-1945	ATTORNEY FOR SECURED CREDITOR	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input checked="" type="checkbox"/> Other <u>ECF</u> (As authorized by the Court or by rule. Cite the rule if applicable.)
IRS/CENTRALIZED INSOLVENCY OPERATION PO Box 7346 Philadelphia, PA 19101	CREDITOR	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)

Name and Address of Party Served	Relationship of Party to the Case	Mode of Service
Fb&T/Mercury 2220 6th St Brookings, SD 57006	CREDITOR	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
ATTN: MANAGING AGENT, PRESIDENT, OR OFFICER Noah Bank 7301 Old York Road Elkins Park, PA 19027	SECURED CREDITOR	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input checked="" type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
ATTN: MANAGING AGENT, PRESIDENT, OR OFFICER M&T Bank P.O. Box 62182 Baltimore, MD 21264-2182	SECURED CREDITOR	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input checked="" type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
ATTN: MANAGING AGENT, PRESIDENT, OR OFFICER Hudson City Savings Bank West 80 Century Road Paramus, NJ 07652	SECURED CREDITOR	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input checked="" type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
ATTN: MANAGING AGENT, PRESIDENT, OR OFFICER Bank Of America, N.A. 4909 Savarese Cir Tampa, FL 33634	SECURED CREDITOR	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input checked="" type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)